POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	2/23/01
FORMALITY REVIEW	MT	523	03/08/01
RESPONSE FORMALITY REVIEW	mm	780	5-22-01

INDEX OF CLAIMS

✔ ..... Rejected
= ..... Allowed
— (Through numeral)... Canceled
÷ ..... Restricted
N ..... Non-elected
I ..... Interference
A ..... Appeal
O ..... Objected

Claim		Date
Final	Original	4/20/04
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Claim		Date
Final	Original	
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Claim		Date
Final	Original	
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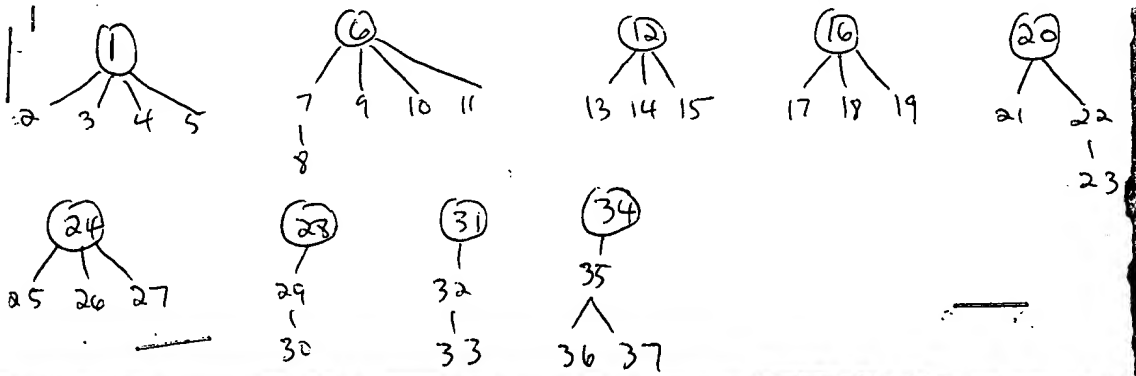

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